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PTO/SB/21 (09-04)

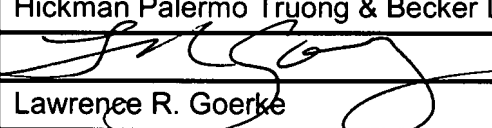
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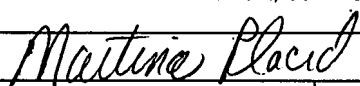
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OFFICE OF PATENT & TRADEMARK TRANSMITTAL FORM (to be used for all correspondence after initial filing) JUN 04 2007 PATENT & TRADEMARK OFFICE	Application Number	10/816,460	
	Filing Date	March 31, 2004	
	First Named Inventor	Pashi Sadri	
	Art Unit	2165	
	Examiner Name	Jacques Veillard	
Number of Pages in This Submission	15	Attorney Docket Number	50269-0571

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Check for \$450.00
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	Return receipt postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks The Director is hereby authorized to charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 to Deposit Account Number 50-1302 Deposit Account Name: Hickman Palermo Truong & Becker LLP	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Hickman Palermo Truong & Becker LLP		
Signature			
Printed name	Lawrence R. Goerke		
Date	May 29, 2007	Reg. No.	45,927

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Martina Placid	Date	May 29, 2007

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

OFFICE TRANSMITTAL
For FY 2005
JUN 04 2007
U.S. PATENT & TRADEMARK OFFICE☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$450.00)**Complete if Known**

Application Number	10/816,460
Filing Date	March 31, 2004
First Named Inventor	Pashi Sadri
Examiner Name	Jacques Veillard
Art Unit	2165
Attorney Docket Number	50269-0571

METHOD OF PAYMENT (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____Deposit Account Deposit Account Number: 50-1302 Deposit Account Name: Hickman Palermo Truong & Becker LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**☒ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments
under 37 CFR 1.16 and 1.17**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
36	- 27 or HP = 9	x 50.00	= 450.00

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
3	- 3 or HP = 0	x 200.00	= 0.00

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).


Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge)

SUBMITTED BY

Signature		Registration No. 45,927 (Attorney/Agent)	Telephone 408-414-1080
Name (Print/Type)	Lawrence R. Goerke	Date	May 29, 2007

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select opti



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Confirmation No. 8403

Pashi SADRI, et al.

Examiner: Jacques VEILLARD

Application Serial No. 10/816,460

Group Art Unit No. 2165

Filed: March 31, 2004

For: DELIVERING ITEMS BASED ON LINKS TO RESOURCES ASSOCIATED
WITH SEARCH RESULTS

Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Sir:

This is in response to the Office Action mailed February 26, 2007, the shortened statutory period for which runs until May 29, 2007. Please amend the subject application as indicated below and consider the following remarks.

- Amendments to Claims begin on page 2 of this paper.
- Remarks begin on page 9 of this paper.

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450	
on <u>May 29, 2007</u> Date	by <u>Martina Placid</u> Ms Martina Placid